

WORLD HEALTH FOR WORLD PEACE

Many of the Nation's leaders in medicine, public health, education, science, and industry and leaders in Congress and the executive branch of the Federal Government gathered at the Second National Conference on World Health held in Washington, D.C., May 7-9, 1959. The meeting was sponsored by the National Citizens Committee for the World Health Organization with the assistance and participation of more than 200 health, educational, welfare, civic, and business organizations. The committee was organized 6 years ago to inform Americans about international health problems, the work of WHO and other agencies in solving these problems, and why international cooperation is important both for health and for peace.

Dr. Milton S. Eisenhower, president of Johns Hopkins University, served as chairman of the conference, which was held immediately prior to the 12th World Health Assembly in Geneva. Dr. Ernest L. Stebbins, president of the National Citizens Committee for WHO, opened the conference, which was attended by approximately 1,500 persons.

In addition to providing stimulus and direction, the conference was significant in shaping and clarifying U.S. policy on international health matters, according to Dr. Leroy E. Burney, Surgeon General of the Public Health Service.

More than 50 speakers and discussion leaders ranged over subjects related to international health within the general context of the conference theme, "World Health for World Peace." Following this summary of their comments is the full text of the speech given by Dr. Abraham Horwitz, director of the Pan American Sanitary Bureau, the Regional Office for the Americas of the World Health Organization.

There was striking unanimity in support of a bigger, stronger World Health Organization,

an organization more adequately financed to meet the challenge of a world in which two-thirds of the population live in conditions of disease, malnutrition, poverty, and ignorance.

Speaker after speaker stressed the vital part that world health must play in reaching world peace and stability. And pervading the conference was the feeling that the atomic age had placed humanity at a crossroads, the road to annihilation or the road to peace through cooperation. Dr. Andrew W. Cordier, executive assistant to the United Nations Secretary General, expressed this feeling when he said that "the threat of the atom is a threat which is countered in turn with the promise of the atom, and therefore the delicate balance between that which is destructive and that which gives vast promise is a balance fraught with greater consequences than ever before in the history of the world."

International Understanding

An opinion voiced by several speakers was that, of all the fields of international endeavor, world health is best suited to provide experience in working together without competition in a cause in which all believe. In his opening statement Dr. Eisenhower said:

"Peoples of vastly different cultures can work together in harmony in this noncontroversial area. Here an achievement in one country is a benefit to all others. Here multilateral cooperation is not a subtraction in one nation to achieve addition in another. Rather it is a multiplication of benefits to all. Massive success in international health cooperation could well serve as a model for other efforts to build a cooperative world characterized by peace, freedom, and justice."

Reinforcing this view, Arthur S. Flemming, Secretary of Health, Education, and Welfare stated that "an effective health for peace cru-

sade could do more to bring peace in our time than any other single program." Senator Lister Hill quoted Dr. Gunnar Gunderson, president of the American Medical Association, to the effect that "medicine with its influence and its resources fully mobilized, can perhaps do more for world peace than all the billions of dollars poured into armaments."

Leo Cherne, chairman of the board of the International Rescue Committee, pointed out, "Medical aid cannot be misrepresented as flowing from self-interest; it cannot be regarded as action remote from the needs of people; it cannot be linked with regimes which may or may not be popular." He added, "When we apply our resources and our talents to the medical needs, the life and death needs of diseased and deprived peoples, we take the final step and one which cannot be misinterpreted."

Cooperation in medical research and in disease control is setting habits and attitudes that "are transferable and will subtly but surely have a beneficial influence on the political climate in the world," stated Assistant Secretary of State Francis O. Wilcox, adding that future historians will credit the present campaigns for the total elimination of disease as among the most remarkable and important achievements of mankind.

Several speakers warned their fellow Americans against attitudes of smugness and self-sufficiency in their relations with some of the lesser developed areas of the world. We have as much to learn from people of other countries as they have to learn from us, stated Dr. Cordier. United Nations technical workers, he said, have found so much individual skill, understanding, and wisdom in the so-called underdeveloped countries that they have come back from their overseas assignments with feelings of great humility and a more realistic perspective of the world.

Brains are not the monopoly of any country, said Congressman Walter H. Judd, who himself spent many years in China as a medical missionary. He pointed out that most of the basic medical discoveries "came from some place where you didn't expect them to come from." This brought up reference to a comprehensive listing of hundreds of medical discoveries in general use today and the geographic

source of their origin, published recently in a U.S. Senate Committee report.

Economic Stake in Health

America's stake in world health was a major subject of discussion at the conference. According to Congressman Judd, those countries with the highest health standards have most to gain from improved world health, and most to lose from diseases that can sweep in from abroad. He reminded his listeners that WHO had, in the past 10 years, checked half a dozen tremendous epidemics "that could have swept over the world including the United States."

Americans must be made to realize that health in the rest of the world is in their own self interest, Senator Richard L. Neuberger stated in support of that thesis. And the American stake in world health is not limited only to the protection of health in the United States, it was pointed out.

One of six forum discussions held during the conference was devoted to health and economic development. Improved health standards are indispensable for any real economic development, it was maintained, since the human resource is the richest economic asset in any country. Poverty-stricken, disease-ridden populations are not a good market for industrial products, and their own output is low and poor in quality.

Mr. Cherne urged that "we recognize that military and economic progress cannot be separated from the physical strength and vitality of any people. Effective economic aid requires a reasonably healthy work force. Viable operation of new industries, no matter how modest, requires a community reasonably free from infection, reasonably capable of applying energy, a community free from unnecessary blindness, debilitating diseases, malnutrition, and a whole variety of ills which affect the stomach, the hands, the limbs, the muscles of men, women, and children of so much of the world."

A related aspect of America's stake in world health was brought out by Dr. Howard A. Rusk, associate editor of the *New York Times*. He maintained that Americans had been paying a 15 percent hidden tax on every article exported to this country from certain malari-

ous areas in the Philippines, areas now freed from that disease. In one small region in Greece, he said, following a malaria eradication program, the rice yield increased four times. In many countries deficient in food production, like India, potentially rich agricultural lands have lain fallow for centuries, depopulated by the ravages of malaria and other preventable diseases. Such lands are now being brought back into cultivation with the restoration of health, Dr. Rusk said.

Another point developed at the conference was that, once people generally recognize their enormous economic stake in the improvement of world health, they will be more generous in their contributions to the funds necessary to get on with the job.

Dr. Flemming urged voluntary organizations to develop and support private programs to provide medical care and teaching in other nations. "I am convinced that these voluntary groups, through their international organization and counterparts in other countries, can bring peoples of other countries to the point where they will have an appreciation of the values that flow from private groups within their communities taking the initiative in dealing with their own health programs," he said.

Congressman Judd also stressed that voluntary organizations and individuals can make important contributions because they are not bound by government protocol and have more opportunity for imagination, experimentation, and demonstration.

"Strong support of the United Nations and its various specialized agencies such as the World Health Organization represents a fundamental part of United States foreign policy," Mr. Wilcox assured the conference in reviewing the benefits, both indirect and direct, that the United States had derived from WHO's work in raising health standards everywhere. He listed these benefits as the control or eradication of infectious disease at the source, rapid reporting of disease outbreaks almost worldwide, exchange of information and ideas on health and medical advances, the international laboratory networks, and recommendations of common names and standards of purity and potency for drugs and biologicals and the preparation of biological standards.

Secretary Flemming urged that the major contributing nations of the world, including the United States, increase their financial support of WHO. This position was strongly endorsed by Senator Hubert Humphrey, who urged increased contributions, stating that the present total of \$26 million available annually to the Organization (including all sources of funds, not only the regular budget) was not enough even to scratch the surface of WHO's responsibilities. Several speakers contrasted the vast sums spent annually on research and production of weapons for mass destruction with the relatively insignificant amounts devoted to promoting better health throughout the world.

During the conference many suggestions were made concerning the manpower necessary to carry out an effective "health for peace" crusade. Participants in a forum discussion devoted to international medical research emphasized the importance of developing a career pattern which would permit young scientists and teachers to accept assignments in other countries. They suggested collaborative arrangements between universities in the United States and other countries to permit rotating persons as a requisite of career advancement.

Both WHO and the International Cooperation Administration are using regional training centers more extensively, according to Dr. Howard M. Kline, Division of International Health, Public Health Service. He felt that it was best to train candidates in their own countries or in areas where educational traditions, culture, and language are familiar, and that training in the United States was a last choice because our educational centers are adapted to interests and traditions foreign to students from most other countries.

Congressman Judd urged more care in selecting personnel, earlier and more intensive study of languages, and 3-year tours overseas.

Expanding WHO Activities

Looking to the future, a number of suggestions were made for the expansion of international health activities. Secretary Flemming asked for a mobilization of the resources of national and international, official and voluntary agencies in a coordinated plan to accom-

plish three health objectives: mass control of preventable diseases, provision of modern health and medical services to the total world population, and advancement of medical science through pooling of knowledge and skills and through development of worldwide research potential.

To accomplish these objectives, Dr. Flemming advocated far greater reliance on WHO than at present. It should be up to the World Health Organization, he said, to set the goals and priorities and to map programs for common action to be carried out cooperatively by international, regional, national, official, and voluntary organizations. He stated further that United States bilateral health programs should be directly related to the attainment of agreed-upon world goals as they are worked out through WHO. "As we as a Nation step up our support of international health, we should shift to a multilateral program as rapidly as this can be done, consistent with our overall foreign policy objectives," Secretary Flemming said.

Senator Humphrey proposed that WHO move more fully into the field of the health aspects of atomic radiation. This is one area, he said, in which WHO will have an unparalleled opportunity for leadership, a leadership in a field which overlaps and overflows the scientific into the political—the area of radioactive fallout. "WHO is uniquely qualified to play a far larger role than at present in securing scientific meeting of the minds as to effects of radioactive fallout on present and future generations," he stated.

Urging a greatly expanded WHO program, Senator Humphrey stated that the existence today of malaria, smallpox, hookworm, yaws, trachoma, and tuberculosis "represents a blot on the conscience of modern man. They are a formidable barrier on the road to any world of progress, peace, and plenty." To cope with this on a really effective scale, he urged the bold mobilization of American resources. WHO should be encouraged and helped, he said, to launch campaigns for the eradication, not only of smallpox, but a whole selection of those diseases amenable to eradication. And WHO should be supplied with the funds necessary to accelerate man's search for answers to

the "baffling" diseases such as cancer, heart disease, and arthritis, he said.

The Senator then made a dramatic proposal for the use of food surpluses aimed at breaking the vicious circle of, as he put it, hunger breeds disease—breeds poverty—breeds hunger. Storage costs of surplus foods in warehouses, he said, have amounted to a billion dollars a year, to which should be added another quarter of a billion dollars for the annual cost of deterioration.

Dr. Thomas Parran, former Surgeon General of the Public Health Service and a past president of the National Citizens Committee for WHO, struck a note of optimism for the future outlook when he suggested that although progress toward world health has been substantial, "we may be on the eve of the greatest forward movement in this relatively new type of collaboration and cooperation among peoples that the world has ever seen."—HAROLD BALLOU, *consultant, Office of the Surgeon General, Public Health Service.*

The Humanistic Relevance Of Public Health

From its beginnings, medicine has evolved as an art based on moral and aesthetic principles, pursuing the knowledge of man as a whole being, both in his physical and spiritual aspects, to assist him in health and disease. As the scientific phase of medicine developed, knowledge of human nature was deepened and the scope of medicine was enlarged. The good physician serves mankind with generosity, sensitivity, and kindness.

Medicine is thus, in essence, humanism—understanding man in historical perspective and social evolution, surrounded as he is by an ever-changing environment. With these objectives, medicine today is both a biological and a social science bearing directly on all the complexities of society, including man's beliefs, traditions, ideas, and ways of living.

For man as a member of society living in a community, community medicine becomes public health. And public health is the expression of man's endeavors to prevent disease, to protect and promote health, and to lengthen life.

In so doing, public health lays the foundations of human dignity and self-respect and promotes peace of mind, the basis for harmonious existence within families, groups, and communities.

So conceived, health has a universal projection as part of the efforts of mankind to achieve welfare, peace, and happiness. Galen said 2,000 years ago, "Health is a sort of harmony."

Constant Interrelationships

Good health, however, does not solve all the problems of welfare. For the progressive evolution of organized communities, human energy of high quality is essential, and this in turn implies an equally high quality of public health. But equally essential is education appropriate to the different periods of life, with a minimum indispensable for all, in order to facilitate adaptation to the environment and thus bring about good human relations. Of no less importance are adequate nutrition, housing, and income; in sum, rational and balanced economic development. It is from such development that will come the production of enough to satisfy the needs of an increasing population.

There is a constant interrelationship among health, economy, and social progress. Experience shows that immediate results can be obtained through organized public health, but the effect will not be lasting unless the other factors which condition well-being are improved simultaneously. It is not enough to maintain a healthy population able to produce and consume, even though it has a sense of responsibility and awareness of common effort to achieve common good. Such a population, constituting a veritable reserve of human energy, demands opportunities for self-realization which can be supplied only by means of well-rounded economic development.

The vicious circle of poverty and disease cannot be successfully broken by attacking disease only. The important thing is to take positive action on all the major factors relating to poverty.

These principles are, in our opinion, the basis for a cooperative effort throughout the Americas to bring about economic development and the welfare of the people in orderly and progressive fashion. To achieve this aim, govern-

ments and the international organizations they have created, supported by individuals and groups in all walks of life, must join together. The urgency of this task is revealed by the present condition of the peoples of the Americas.

Latin America is today the world region which shows the most rapid increase in population. The present rate is almost double the average of other regions, so that the figure of 182 million estimated for 1958 may approximate 592 million by the year 2000. Seventeen of the twenty Latin American countries are expected to double their populations in less than 35 years. Furthermore, this is a young region with 40 percent of its population under 15 years of age. Life expectancy at birth is generally less than 50 years and only in a very few urban communities reaches 60. If to this predominantly youthful population the weight of disease is added, there cannot be enough productive capacity to meet the needs of all.

In these countries infant mortality and child mortality are tragically high, largely because of poor sanitation, prevalence of acute communicable diseases, inadequate nutrition, ignorance, and poverty. The predominance of communicable diseases as the major problem offers great possibilities for organized public health in the Americas, particularly if integrated in a program of economic development.

Water is as important to health as it is to industrial development, yet a water supply in the home is all too uncommon in Latin America. Even in urban areas, at least 30 million people live in dwellings without water; adequate sewage disposal is found even less often. Furthermore, tourism is an important industry in Latin America, and tourism cannot really thrive where water supply and sewage disposal are inadequate and unsafe.

There is still a high proportion of illiteracy, in many of these countries reaching over 50 percent of the population. No community can progress where illiteracy reigns since the people do not have access to sources of knowledge and information.

Latin America has shown in recent years an impressive increase in total production of food, yet, with a rapidly growing population, per capita output has decreased by 6 percent. At the same time, in the great majority of the coun-

tries, the consumption of protein of animal origin is far below the physiological minimum.

The housing problem in Latin America is proverbial. In large areas houses are completely inadequate, and the amount of construction does not keep pace with the normal increase of the population.

As a corollary of all this several countries are undergoing serious inflation, with increasing cost of living, which further reduces an income already insufficient for basic needs.

Economic Roots

At the root of the entire process of development are the economic conditions. Cultivation of arable land in Latin American countries is limited to 4 percent of the total surface. There is an acute insufficiency of capital. Industrial development is in its beginnings and exports are limited. Production is not sufficiently diversified, and all too often countries depend on a single product. Geography is difficult, with large rural areas and inadequate means of communication and transportation, which often make access to resources impossible. If one adds the constant increase of population, it is easy to understand the high rate of unemployment.

Although there is sufficient knowledge to cope with most of the major public health problems of the Americas, the number of trained professional and auxiliary personnel is inadequate. Besides the insufficiency of material resources, local and national health services do not have adequate organization to obtain the best possible yield from the available personnel and resources.

In spite of these shortcomings, progress has been and will continue to be substantial, and the efforts of the governments, with the assistance provided by international organizations, have major accomplishments to their credit.

The World Health Organization and the Pan American Health Organization are actively collaborating with the member governments in strengthening national and local health services, in training professional and auxiliary personnel, in controlling or eradicating acute and chronic communicable diseases, and in searching for new methods for the protection and promotion of health.

The greater the progress toward elimination of pestilence, the clearer becomes the relationship between health and economic progress.

The basic activities in public health, those which further optimal human growth and development by diminishing risks stemming from the physical and social environment, require good planning and organization, well-trained personnel, and large amounts of capital. In the present stage of Latin American growth this capital can be obtained by cooperative measures among all the governments, through a carefully planned and progressive program. The creation of the Inter-American Bank for Development and the current discussions about a common market are excellent indicators of the desires motivating the governments of the Americas. When combined with other similar steps, these measures will clearly serve to improve the living conditions of the people of our hemisphere, while respecting their ideals and individual cultures.

Because this development is so consistent with the philosophy expressed in the constitutions of the World Health Organization and the Pan American Health Organization, it seems to me inevitable that public health activities will be a major aspect of the balanced plan for economic progress which I foresee.

Our countries are passing through a phase of destiny which calls for genuine merging of forces to face the major problems of today and tomorrow. But we must always keep before us that our ultimate aim is the welfare of mankind.

The moment in which we live is a real challenge to fate which needs to be expressed in simple and direct terms and requires equally simple and direct answers.

We health workers believe that we have shown what international collaboration can do to give incentive to progress. We offer this experience in order to help find the answers so badly needed in the world today. We do so with the conviction that in fighting for health we are fighting for peace.—ABRAHAM HORWITZ, M.D., *director of the Pan American Sanitary Bureau, Regional Office for the Americas of the World Health Organization.*